'FORM D **Notice of Exempt** 



# U.S. Securities and Exchange Commission Washington, DC 20549

#### (See instructions beginning on page 5)

nat misstatements or omissions of fact constitute federal criminal violations. See 18 U.S.C. 1001.

**OMD APPROVAL** OMD Number: 3235-0076

Expires: March 31, 2009 Estimated average burden hours

per response: 00.40

13/4780

Item 1. Issuer's Identity				
Name of Issuer	Desidence Many	ne(s) ☑ None	Entity Type (Select one)	
Goldman Sachs Direct Strategies Fund II Offshore, Ltd.	Previous Nam	☐ Corporation		
Jurisdiction of Incorporation/Organization		POCCUSO	☐ Limited Partnership ☐ Limited Liability Company	
Cavman			☐ General Partnership	
Year of Incorporation/Organization		MAR 2 7 2009	☐ Business Trust	
(Select one)	7		☑ Other (Specify)	
☐ Over Five Years Ago ☑ Within Last Five	Years 2004 (specify year)	HCANSONIFEMIE	Exempted Limited Company	
(If more than one issuer is filing this notice, check ti	his box 🛘 and identify addition	nal issuer(s) by attaching Ite	ems 1 and 2 Continuation Page(s).)	
Item 2. Principal Place of Business a	nd Contact Information	on		
Street Address 1	·	Street Address 2		
One New York Plaza			<u> </u>	
City	State/Province/Country	ZIP/Postal Code	Phone No.	
New York	NY	10004	(212) 902-1000	
Item 3. Related Persons			ñra'	
Last Name		First Name	MEII নির্ভিত্তি Middle Name	
Goldman Sachs Hedge Fund Strategies LLC*			Section	
Street Address 1	,	Street Address 2	MAR 13 ZOUS	
One New York Plaza			100	
City	State/Province/Country	ZIP/Postal Code	Phone No.	
New York	NY	10004	(212) 902-1000	
Relationship(s):   □ Executive Officer	☐ Director	☑ Promoter*		
Clarification of Response (if necessary): *the Issu	er's Investment Manager			
(Identify a ltem 4. Industry Group (Select one)	dditional related persons t	y checking this box ☑ a	nd attaching Item 3 Continuation Page(s).)	
□ Agriculture	☐ Business Service	200	☐ Manufacturing	
Banking and Financial Services			Real Estate	
☐ Commercial Banking	Energy	ac.	□ Commercial	
☐ Insurance			☐ Construction	
☐ Investing ☐ Investment Banking	☐ Energy Conservation		☐ REITS & Finance ☐ Residential	
☑ Pooled Investment Fund	☐ Coal Mining		☐ Other Real Estate	
If selecting this industry group, also	☐ Environmental Services		☐ Retailing	
select one fund type below and answer the question below:	T 011 9 Coo		Restaurants	
☐ Hedge Fund	Cl Other Foorage		Technology	
☐ Private Equity	Health Care		☐ Computers	
☐ Venture Capital Fund ☑ Other Investment Fund	☐ Biotechnology		☐ Telecommunications	
Is the issuer registered as an	C Haaith Insurance		☐ Other Technology	
investment company under the	☐ Health Insurance Ti ☐ Hospitals & Physicians		Travel	
Investment Company Act of 1940?	•	=	☐ Airlines & Airports ☐ Lodging & Conventions	
☐ Yes   ☑ No	☐ Pharmaceuticals		☐ Tourism & Travel Services	
☐ Other Banking & Financial Services	☐ Other Health Care		☐ Other Travel ☐ Other	

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	<del></del>	···		
Revenue Range (for issuer not specifying "hedge" or "other investment" fund in Item 4 above)		Aggregate Net Asset Value Range (for issuer specify "hedge" or "other investment" fund in Item 4 above)		
☐ No Revenues ☐ \$1 - \$1,000,000 ☐ \$1,000,001 - \$5,000,000 ☐ \$5,000,001 - \$25,000,000 ☐ \$25,000,001 - \$100,000,000 ☐ Over \$100,000,000 ☐ Decline to Disclose ☐ Not Applicable		☐ No Revenues ☐ \$1 - \$1,000,000 ☐ \$1,000,001 - \$5,000,000 ☐ \$5,000,001 - \$25,000,000 ☐ \$25,000,001 - \$100,000,000 ☐ Over \$100,000,000 ☑ Decline to Disclose ☐ Not Applicable		
Item 6. Federal Exemptions and Exclusions Clair	ned (Select al	I that appl	y)	
	Investment Con	npany Act Se	ction 3(c)	
□ Rule 504(b)(1) (not (i), (ii) or (iii)) □ Rule 504(b)(1)(i) □ Rule 504(b)(1)(ii) □ Rule 504(b)(1)(iii) □ Rule 505 □ Rule 506 □ Securities Act Section 4(6)	☐ Section 3(c)	(2) (3) (4) (5) (6)	☐ Section 3(c)(9) ☐ Section 3(c)(10) ☐ Section 3(c)(11) ☐ Section 3(c)(12) ☐ Section 3(c)(13) ☐ Section 3(c)(14)	Propagaline Section
Item 7. Type of Filing				125 11 12 12 12 12 12 12 12 12 12 12 12 12
☐ New Notice OR ☑ Amendment				
Date of First Sale in this Offering: February 1, 2005		OR	☐ First Sale Yet to	Occur
Item 8. Duration of Offering				
Does the issuer intend this offering to last more than one year?		☑ Yes	□ No	
Item 9. Type(s) of Securities Offered (Select all the	nat apply)			<del></del>
☐ Equity ☐ Debt ☐ Option, Warrant or Other Right to Acquire Another Security ☐ Security to be Acquired Upon Exercise of Option, Warrant or Other Right to Acquire Security	☐ Tenant	Investment F in-Common S Property Sec Describe)	Securities	
Item 10. Business Combination Transaction				
	ation transaction, s	uch as a mer	ger, acquisition or excha	nge offer?

### FORM D

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Ainimum investment accepted from any outside investor \$ 0	
tem 12. Sales Compensation Recipient	Recipient CRD Number
Goldman, Sachs & Co.	□ No CRD Number
Associated) Broker or Dealer 🖾 None	(Associated) Broker or Dealer CRD Number
treet Address 1	Street Address 2
85 Broad Street	
City State/Province/C	Country ZIP/Postal Code
New York NY	10004
tates of Solicitation	
AL AK AZ AR CA CO	CT DE DC DFL GA HI DI
II. O IN O IA O KS O KY O IA	ME DMD DMA DMI DMN DMS DI
	UNY UNC UND UOH UOK UOR UI
☐ RI ☐ SC ☐ SD ☐ TN ☐ TX ☐ UT dentify additional person(s) being paid compensation by checking	
em 13. Offering and Sales Amounts	) this box is and attaching item 12 continuation? age(s).)
em 13. Offering and Sales Amounts	
a) Total Offering Amount \$ 0	OR Indefinite
) Total Amount Sold .\$ <u>42,987,684</u>	Section
c) Total Remaining to be Sold \$ 0	OR Indefinite 的社 1
(subtract (a) from (b)) tarification of Response (if necessary)	Hashingion, D
<u> </u>	(एस्ट्र)
em 14. Investors	
heck this box ☐ if securities in the offering have been or may be	sold to persons who do not qualify as accredited investors, and enter the num
uch non-accredited investors who already have invested in the off	ering:
nter total number of investors who have already invested in the of	ffering:
em 15. Sales Commissions and Finders' Fees Ex	
	fees expenses, if any. If an amount is not known, provide an estimate and ch
rovide separately the amounts of sales commissions and finders' ox next to the amount.	
ox next to the amount.	Gales Commissions \$ 0
ox next to the amount.	

### FORM D '

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Item 16. Use of Proceeds	
Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.	0 Estimate
Clarification of Response (if necessary)	
Signature and Submission	
Please verify the information you have entered and review the Terms of Submiss	sion below before signing and submitting this notice.
Terms of Submission. In submitting this notice, each identified issuer is:	
Notifying the SEC and/or each State in which this notice is filled of the content of written request, in accordance with applicable law, the information furnished to or the Irrevocably appointing each of the Secretary of the SEC and the Security which the issuer maintains its principal place of business and any State in which that these persons may accept service on its behalf, of any notice, process or placegistered or certified mail, in any Federal or state action, administrative proceed jurisdiction of the United States, if the action, proceeding or arbitration (a) arises subject of this notice, and (b) is founded, directly or indirectly, upon the provisions the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Statutes; or (ii) the laws of the State in which the issuer maintains its princip Certifying that, if the issuer is claiming a Rule 505 exemption, the issues stated in Rule 505(b)(2)(iii).  *This undertaking does not affect any limits Section 102(a) of the National Security 290,110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require infare "covered securities" for purposes of NSMIA, whether in all instances or due to cannot routinely require offering materials under this undertaking or otherwise and to do so under NSMIA's preservation of their anti-fraud authority.	ities Administrator or other legally designated officer of the State in this notice is filed, as its agents for service of process, and agreeing that such service may be made by ing, or arbitration brought against the issuer in any place subject to the out of any activity in connection with the offering of securities that is the so of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, estment Advisers Act of 1940, or any rule or regulation under any of all place of business or any State in which this notice is filed. Or is not disqualified from relying on Rule 505 for one of the reasons wittens Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-formation. As a result, if the securities that are the subject of this Form D of the nature of the offering that is the subject of this Form D, States in the subject of t
Each identified issuer has read this notice, knows the contents to be true, and ha duly authorized person. (Check this box □ and attach Signature Continuation Parepresented by signer below.)	
Issuer(s)	Name of Signer
Goldman Sachs Direct Strategies Fund II Offshore, Ltd.	David Kraut
Signature	Title
mh	Vice President of the Issuer's Investment Manager
Number of continuation pages attached: 1	Date ·
	March_12
Persons who respond to the collection of information contained in this form are n number .	ot required to respond unless the form displays a currently valid OMB

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#### Item 3 Continuation Page

Item 3. Related Person (Continued)			
Last Name	First Name		Middle Name
Barbetta	.Jennife <del>r</del>		
Street Address 1		Street Address 2	····
c/o Goldman Sachs Hedge Fund Strategies LL	c .	One New York Plaza	
City	State/Province/Country	ZIP/Postal Code	Phone No.
New York	NY	10004	(212) 902-1000
Relationship(s):   Executive Officer  Clarification of Response (if necessary): *of the	☑ Director* e Issuer and the Issuer's Investm	☐ Promoter	
Last Name	First Name	<u> </u>	Middle Name
Clark	Kent		
Street Address 1		Street Address 2	<u> </u>
c/o Goldman Sachs Hedge Fund Strategies LL	.c	One New York Plaza	<u> </u>
City	State/Province/Country	ZIP/Postal Code	Phone No.
New York	NY	10004	(212) 902-1000
Relationship(s): ☑ Executive Officer* Clarification of Response (if necessary): *of the	☐ Director e Issuer's Investment Manager	া Promoter এ <b>ঞা</b>	SEE Processing Section
Last Name	First Name	inte	/ (Middle Name
Street Address 1		Street Address 2 'fach	 BB
			100
Dity	State/Province/Country	ZIP/Postal Code	Phone No.
Relationship(s): D Executive Officer Clarification of Response (if necessary):	□ Director	□ Promoter	
ast Name	First Name		Middle Name
Street Address 1		Street Address 2	
City	State/Province/Country	ZIP/Postal Code F	Phone No.
Relationship(s):   □ Executive Officer	□ Director		
Promoter Clarification of Response (if necessa		_	

